Under the	perwork Reduction Act of 1995, no persons are requ	ection of information unless if displ	ays a valid OMB control numb		
PETITION	FOR EXTENSION OF TIME UNDER	Docket Number (Options	Docket Number (Optional)		
(Fees	FY 2005 pursuant to the Consolidated Appropriations Act,	KLYCD-05008	KLYCD-05008US1		
Application	Number 10/684,668	Filed 10/14/2003	Filed 10/14/2003		
For ARTIFICIAL VERTEBRAL DISK REPLACEMENT IMPLANT WITH CROSSBAR SPACER				PACER	
Art Unit 3738			Examiner Bruce E	Examiner Bruce E. Snow	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
		<u>Fee</u>	Small Entity Fee		
	One month (37 CFR 1.17(a)(1))	\$120	\$60	s <u>60.00</u>	
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$	
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27.					
☑ A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
☐ The Director has already been authorized to charge fees in this application to a Deposit Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 06-1325 I have enclosed a duplicate copy of this sheet.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).					
attorney or agent of record. Registration Number 46,554					
attorney or agent under 37 CFR 1.34. Registratign number if acting under 37 CFR 1.34					
5 Block 5/6/05					
Signature Date					
	Suvashis Bhattachary	415.3	415.362.3800		
Typed or printed name				Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

forms are submitted.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Total of